

| <b>COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY</b><br>(Includes Reference to PCT International Applications)  | <b>ATTORNEY'S DOCKET NUMBER</b><br>689290-226<br><br>Customer No.: 27162 |                                      |                                      |                                      |                                      |  |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |
|---|--|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--|--|--|--|------------------------------|-----------------------------|--|--|--|------------------------------|-----------------------------|--|--|--|------------------------------|-----------------------------|--|--|--|------------------------------|-----------------------------|--|--|--|------------------------------|-----------------------------|
| <p>As a below named inventor, I hereby declare that:</p> <p style="text-align: center;">Paul E. YOUNG and Reinhard EBNER</p> <p>Residence, post office address and citizenship are as stated below next to my name.</p> <p>I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:</p> <p style="text-align: center;"><b>CANCER-LINKED GENE AS TARGET FOR CHEMOTHERAPY</b></p> <p>the specification of which (check only one item below):</p> <p><input type="checkbox"/> Is attached hereto.</p> <p><input checked="" type="checkbox"/> was filed as United States application<br/>Serial No. PCT/US03/19741<br/>on 10 June 2003<br/>and was amended on (if applicable)</p> <p><input type="checkbox"/> was filed as PCT international application<br/>Number<br/>on<br/>and was amended under PCT Article 19<br/>on (if applicable).</p> <p>I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.</p> <p>I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations §1.56(a).</p> <p>I hereby claim foreign priority benefits under Title 35 United States Code §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:</p> |  |                                      |                                      |                                      |                                      |  |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |
| <b>PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:</b>  |  |                                      |                                      |                                      |                                      |  |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |
| <table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th style="width: 25%;">COUNTRY<br/>(if PCT indicate PCT)</th><th style="width: 25%;">APPLICATION NUMBER</th><th style="width: 25%;">DATE OF FILING<br/>(day, month, year)</th><th colspan="2" style="width: 25%;">PRIORITY CLAIMED<br/>UNDER 35 USC 119</th></tr></thead><tbody><tr><td></td><td></td><td></td><td><input type="checkbox"/> YES</td><td><input type="checkbox"/> NO</td></tr><tr><td></td><td></td><td></td><td><input type="checkbox"/> YES</td><td><input type="checkbox"/> NO</td></tr><tr><td></td><td></td><td></td><td><input type="checkbox"/> YES</td><td><input type="checkbox"/> NO</td></tr><tr><td></td><td></td><td></td><td><input type="checkbox"/> YES</td><td><input type="checkbox"/> NO</td></tr><tr><td></td><td></td><td></td><td><input type="checkbox"/> YES</td><td><input type="checkbox"/> NO</td></tr></tbody></table>   |  | COUNTRY<br>(if PCT indicate PCT)     | APPLICATION NUMBER                   | DATE OF FILING<br>(day, month, year) | PRIORITY CLAIMED<br>UNDER 35 USC 119 |  |  |  |  | <input type="checkbox"/> YES | <input type="checkbox"/> NO |  |  |  | <input type="checkbox"/> YES | <input type="checkbox"/> NO |  |  |  | <input type="checkbox"/> YES | <input type="checkbox"/> NO |  |  |  | <input type="checkbox"/> YES | <input type="checkbox"/> NO |  |  |  | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| COUNTRY<br>(if PCT indicate PCT)  | APPLICATION NUMBER   | DATE OF FILING<br>(day, month, year) | PRIORITY CLAIMED<br>UNDER 35 USC 119 |                                      |                                      |  |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |
|   |  |                                      | <input type="checkbox"/> YES         | <input type="checkbox"/> NO          |                                      |  |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |
|   |  |                                      | <input type="checkbox"/> YES         | <input type="checkbox"/> NO          |                                      |  |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |
|   |  |                                      | <input type="checkbox"/> YES         | <input type="checkbox"/> NO          |                                      |  |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |
|   |  |                                      | <input type="checkbox"/> YES         | <input type="checkbox"/> NO          |                                      |  |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |
|   |  |                                      | <input type="checkbox"/> YES         | <input type="checkbox"/> NO          |                                      |  |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |  |  |  |                              |                             |

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(Includes Reference to PCT International Applications)ATTORNEY'S DOCKET NUMBER  
689290-226  
Customer No.: 27162

I hereby claim the benefit under Title 35, United States Code, §120 or § 119 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

**PRIOR U.S. APPLICATION(S) OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120 or U.S.C. 119:**

| U.S. APPLICATIONS                     |                  |                                       | STATUS (Check one) |                                     |                          |
|---------------------------------------|------------------|---------------------------------------|--------------------|-------------------------------------|--------------------------|
| U.S. APPLICATION NO.                  | U.S. FILING DATE |                                       | PATENTED           | PENDING                             | ABANDONED                |
|                                       |                  |                                       |                    | <input type="checkbox"/>            | <input type="checkbox"/> |
| PCT APPLICATIONS DESIGNATING THE U.S. |                  |                                       |                    | <input type="checkbox"/>            | <input type="checkbox"/> |
| PCT APPLICATION NO.                   | PCT FILING DATE  | U.S. SERIAL NUMBERS ASSIGNED (if any) |                    | <input type="checkbox"/>            | <input type="checkbox"/> |
| PCT/US03/19741                        | 10 June 2003     |                                       |                    | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number) John N. Bain (Reg. No. 18,651); John G. Giffillan III (Reg. No. 22,746); Elliot M. Olstein (Reg. No. 24,025); Raymond J. Lillie (Reg. No. 31,778); William Squire (Reg. No. 25,378); Alan Grant (Reg. No. 33,389); Francis C. Hand (Reg. No. 22,280) and Glennon Troublefield (Reg. No. 39,050)

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|     |                         |  |                                      |                                       |
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|     | POST OFFICE ADDRESS     | POST OFFICE ADDRESS                          | CITY                                 | STATE & ZIP CODE/COUNTRY              |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application of any patent issuing thereon.

|                           |                           |                           |
|---------------------------|---------------------------|---------------------------|
| SIGNATURE OF INVENTOR 201 | SIGNATURE OF INVENTOR 202 | SIGNATURE OF INVENTOR 203 |
| DATE                      | DATE                      | DATE                      |